FOR INSTRUCTIONS, SEE BACK OF FORM

CHECK ONE:

This is an initial* Statement of Organization
This is an amended* Statement of Organization

OCT 1 5 2003



FORM DR-1	STATEMENT OF
(Rev. 07/2003)	ORGANIZATION
For Office U	se Only
Comm. #	

Computer

*An initial Statement of Organization must be filed within 10 days of the committee's accepting contributions, making expenditures, or incurring indebtedness exceeding \$750. Amendments must be filed within 30 days of a change.

Penalties may be imposed for lete-filled Statements of Organization.

MMITTEE TREASURER (mandatory for all committees)	COMMITTEE CHAIR (mandatory except for a candidate's committee)
Name Tevi Reed	Name J J
Mailing Address & Box 1216	Mailing Address ↓ ↓
city. State 1 1 zip Code 1 1 Mason City IA 50402-1216	City, State ↓ ↓ Zip Code ↓ ↓
Phone (641) 424 2281	Phone ()
e-Mail Perireed @ niccu.com	e-Mail
INDICATE PURPOSE OF COMMITTEE – Check One Box X A Comment or description:	Advocate for/against candidate(s) Advocate for/against ballot issue(s)
All Candidates Enter: City CaynCil	District:
Political Party (if applicable) County/Local Candidates and Local Ballot/Franchise Committees En	Year Standing for Election: 2003
County: Lexic Cordo	Date of Election: 11-4-2003
Bank Account Name	Candidate name & Address or Parent Entity (PACs, if applicable),
North Iowa Community Credit)	
Name of Financial Institution/type of Account	Mailing Address Lakeview Drive
Meiling Address 1216	Mason City It 30401
City + City State + Zip + +	Phone (641) 421 1565
エフ・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス	6 e-Mail

STATEMENT OF AFFIRMATION: By filing this document the committee affirms the following:

- 1. The committee and all persons connected with the committee understand that they are subject to the laws in lowa Code chapters 68A and 68B and the administrative rules in Chapter 351 of the lowa Administrative Code.
- 2. That towa Code section 68A.6 and rule 351—4.9 require the filing of disclosure reports and that the fallum to file these reports on or before the required due dates subjects the candidate or chalrperson (in the case of committees other than a candidate's committee) to the automatic assessment of a civil penalty and the possible imposition of other criminal and civil sanctions.
- 3. That lows Code section 68A.14 and rules 351—4.38 through 4.43 require the placement of the words "paid for by" and the name of the committee on all political materials except for those items exempted by statute or rule.
- 4. That lows Code section 68A,15 and rules 351—4.44 through 4.52 prohibit the receipt of corporate contributions by all committees except for statewide and local ballot issue PACs.
- 5. A candidate and a candidate's committee may only expend campaign funds as permitted by lowe code sections 68A,40 through 68A,42 and rule 351—4,25.
- 6. That the committee will continue to file disclosure reports until all activity has ceased, committee funds spent, debts resolved, and a final report and a statement of dissolution (DR-3) has been filed

Signature of Treasurer

AKN Charlie Thomas

Signature of Carolinate, OR, for all other committees. Chairparson

10/15/2003

FOR INSTRUCTIONS, SEE BACK OF FORM		FORM	STATEMENT
CHECK ONE:		DR-1 (Rev.	OF ORGANIZATION
This is an Initial* Statement of Organization This is an amanded* Statement of Organization	~*	Ò7/2003)	
This is an amended* Statement of Organization		For Office U	se Only
"An initial Statement of Organization must be filed within 10 days of the commi	ittee's accapille contibutions, making	Comm.#	
expenditures, or incurring indottedness exceeding \$750. Amendments must be Penalties may be imposed for late-filed Statements of Organization.	ooo	Indexed	
\ nct	2 3 2003	Computer	
COMMITTEE NAME ↓↓			
	Caumil	Comm	11/2
Charlie Thomas - Horange	The Course	COMM	17768
IMPORTANT: Indicate type of committee you are reporting for:			
(1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party	/ (4)County/Local Candidate (5)Co	unty PAC (6)B	allot Issue/Franchise
Committee (7)County/City Central Committee			
COMMITTEE TREASURER (mandatory for all committees)	COMMITTEE CHAIR (mandatory Name ↓ ↓	except for a can	didate's committee)
Name J	Name + +		
Mailing Address +	Malling Address J J		
1 1 / 1 / 12/6	Widning Address V V		
City, State 1 1 Zip Code 1 1	City, State ↓ ↓ Zip Code ↓ ↓	~~~~	
Mason City IA 50402-1216			
Phone (641) 4243381	Phone ()		
e-Mail Ferireed @ niew cem	e-Mail	· · · · · · · · · · · · · · · · · · ·	
INDICATE PURPOSE OF COMMITTEE - Check One Box Adv	rocate for/against candidate(s) 🔲 Adv	vocate for/against	: ballot issue(s)
Comment or description: All Candidates Enter: Office Sought: All Day 10 (1)			
Office Sought:	District:		
Political Party (If applicable)	Year Standing for Election: 20	03	
County/Local Candidates and Local Ballot/Franchise Committees Enter County: (Crro Gord)	Date of Election: 11-4-30	03	
Bank Account Name ↓↓	Candidate name & Address or Pare	ent Entity (PACs.	If applicable).
War a contract	1 8/ 1 // 1/ 6 1	iate, or Sponsor	
North Inwa Community Credit Union Name of Financial Institution/type of Account	Pat K HDranam	ON AKA	Charlie thomas
(SAVINAS)	Mailing Address & Dieux 290 Lake Vieux	1 Drive	
Malling Address ↓ ↓	City + A S	ate 4 4	Zip ↓ ↓
P1 Box 1216	Grason City IA	iale 5040/	2.10
City 1 State 1 Zip 1	Phone (41) 421 - 1565	-	
Mason City IA 50402-1216	e-Mail Charlie thomas		annel.com
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. A candidate and a candidate's committee may only expend campaign funds as po	rmitted by Iowa code sections 68A.40 throu	igh 68A,42 and rui	e 3514.25.
. That the committee will configure to file disclosure reports until all activity has cease lasolution (RR-3) has been filed.			
	10-77-200	2	
Signature of Treasurer	10-22-200 Jumas 10-22-20	gned	
HOTEL USE AKA Charle TI	umas 10-62-20	03	
Signature of Candidate, OR, foodi ather committees, Chairperson	Date S	ilgned	

Date Signed